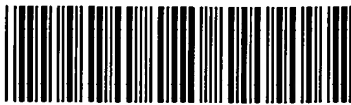


# Index of Claims



Application No.

10/643,429

Examiner

William M Pierce

Applicant(s)

VANCURA, OLAF

Art Unit

3711

|   |          |
|---|----------|
| ✓ | Rejected |
| = | Allowed  |

|   |                                |
|---|--------------------------------|
| — | (Through numeral)<br>Cancelled |
| ÷ | Restricted                     |

|   |              |
|---|--------------|
| N | Non-Elected  |
| I | Interference |

|   |          |
|---|----------|
| A | Appeal   |
| O | Objected |

| Claim |          | Date |  |  |  |  |  |  |  |  |  |
|-------|----------|------|--|--|--|--|--|--|--|--|--|
| Final | Original |      |  |  |  |  |  |  |  |  |  |
|       | 1        | ✓    |  |  |  |  |  |  |  |  |  |
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|       | 16       |      |  |  |  |  |  |  |  |  |  |
|       | 17       | ✓    |  |  |  |  |  |  |  |  |  |
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|       | 29       |      |  |  |  |  |  |  |  |  |  |
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|       | 31       |      |  |  |  |  |  |  |  |  |  |
|       | 32       |      |  |  |  |  |  |  |  |  |  |
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|       | 34       |      |  |  |  |  |  |  |  |  |  |
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|       | 37       |      |  |  |  |  |  |  |  |  |  |
|       | 38       |      |  |  |  |  |  |  |  |  |  |
|       | 39       |      |  |  |  |  |  |  |  |  |  |
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|       | 50       |      |  |  |  |  |  |  |  |  |  |

| Claim |          | Date |  |  |  |  |  |  |  |  |  |
|-------|----------|------|--|--|--|--|--|--|--|--|--|
| Final | Original |      |  |  |  |  |  |  |  |  |  |
|       | 51       |      |  |  |  |  |  |  |  |  |  |
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|       | 53       |      |  |  |  |  |  |  |  |  |  |
|       | 54       |      |  |  |  |  |  |  |  |  |  |
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|       | 57       |      |  |  |  |  |  |  |  |  |  |
|       | 58       |      |  |  |  |  |  |  |  |  |  |
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|       | 61       |      |  |  |  |  |  |  |  |  |  |
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|       | 63       |      |  |  |  |  |  |  |  |  |  |
|       | 64       |      |  |  |  |  |  |  |  |  |  |
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|       | 67       |      |  |  |  |  |  |  |  |  |  |
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|       | 71       |      |  |  |  |  |  |  |  |  |  |
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|       | 76       |      |  |  |  |  |  |  |  |  |  |
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|       | 82       |      |  |  |  |  |  |  |  |  |  |
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|       | 84       |      |  |  |  |  |  |  |  |  |  |
|       | 85       |      |  |  |  |  |  |  |  |  |  |
|       | 86       |      |  |  |  |  |  |  |  |  |  |
|       | 87       |      |  |  |  |  |  |  |  |  |  |
|       | 88       |      |  |  |  |  |  |  |  |  |  |
|       | 89       |      |  |  |  |  |  |  |  |  |  |
|       | 90       |      |  |  |  |  |  |  |  |  |  |
|       | 91       |      |  |  |  |  |  |  |  |  |  |
|       | 92       |      |  |  |  |  |  |  |  |  |  |
|       | 93       |      |  |  |  |  |  |  |  |  |  |
|       | 94       |      |  |  |  |  |  |  |  |  |  |
|       | 95       |      |  |  |  |  |  |  |  |  |  |
|       | 96       |      |  |  |  |  |  |  |  |  |  |
|       | 97       |      |  |  |  |  |  |  |  |  |  |
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|       | 99       |      |  |  |  |  |  |  |  |  |  |
|       | 100      |      |  |  |  |  |  |  |  |  |  |

| Claim |          | Date |  |  |  |  |  |  |  |  |  |
|-------|----------|------|--|--|--|--|--|--|--|--|--|
| Final | Original |      |  |  |  |  |  |  |  |  |  |
|       | 101      |      |  |  |  |  |  |  |  |  |  |
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|       | 104      |      |  |  |  |  |  |  |  |  |  |
|       | 105      |      |  |  |  |  |  |  |  |  |  |
|       | 106      |      |  |  |  |  |  |  |  |  |  |
|       | 107      |      |  |  |  |  |  |  |  |  |  |
|       | 108      |      |  |  |  |  |  |  |  |  |  |
|       | 109      |      |  |  |  |  |  |  |  |  |  |
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|       | 111      |      |  |  |  |  |  |  |  |  |  |
|       | 112      |      |  |  |  |  |  |  |  |  |  |
|       | 113      |      |  |  |  |  |  |  |  |  |  |
|       | 114      |      |  |  |  |  |  |  |  |  |  |
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|       | 127      |      |  |  |  |  |  |  |  |  |  |
|       | 128      |      |  |  |  |  |  |  |  |  |  |
|       | 129      |      |  |  |  |  |  |  |  |  |  |
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|       | 131      |      |  |  |  |  |  |  |  |  |  |
|       | 132      |      |  |  |  |  |  |  |  |  |  |
|       | 133      |      |  |  |  |  |  |  |  |  |  |
|       | 134      |      |  |  |  |  |  |  |  |  |  |
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|       | 136      |      |  |  |  |  |  |  |  |  |  |
|       | 137      |      |  |  |  |  |  |  |  |  |  |
|       | 138      |      |  |  |  |  |  |  |  |  |  |
|       | 139      |      |  |  |  |  |  |  |  |  |  |
|       | 140      |      |  |  |  |  |  |  |  |  |  |
|       | 141      |      |  |  |  |  |  |  |  |  |  |
|       | 142      |      |  |  |  |  |  |  |  |  |  |
|       | 143      |      |  |  |  |  |  |  |  |  |  |
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|       | 145      |      |  |  |  |  |  |  |  |  |  |
|       | 146      |      |  |  |  |  |  |  |  |  |  |
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